PATENT APP ATION FEE DETERMINATION REC

Application or Docket Number

10/531643

U.S. NATIONAL STAGE FEES BASIC FEE EXAMINATION FEE Satisfies PCT Article 33(1)- (4) = \$50/\$100 SEARCH FEE SEARCH FEE U.S. ISSA = \$50/\$100 ALL other countries = \$200/\$400 TOTAL CHARGEABLE CLAIMS LARGE ENT. = \$300 BASIC FEE EXAM. FEE SEARCH FEE SEARCH FEE TOTAL CHARGEABLE CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II OR SMAL RATE FEE OR SMAL OR SMAL RATE FEE OR SMAL OR TOTAL	100
BASIC FEE	300 200 400 100 1000
Satisfies PCT Article 33(1) All other situations = EXAM. FEE	300 200 400 100 1000
EXAMINATION FEE Satisfies PCT Article 33(1)	200 400 100 1000
SEARCH FEE	400 100 1000
TOTAL CHARGEABLE CLAIMS	/U 0
TOTAL CHARGEABLE CLAIMS	/U 0
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS REMAINING AFTER AMENDMENT Total * Minus *** Total Total * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total ADDIT Total ADD	/000
# If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * SMALL ENTITY OR * SMALL * SMALL * ADDI- * TIONAL * FEE * ADDI- * TIONAL * FEE * FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM * TOTAL ADDIT. * OR * \$ 360: * * \$ 4 \$ 360: * TOTAL OR * \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	/00 O
* If the difference in column 1 is less than zero, enter "0" in column 2 **CLAIMS AS AMENDED - PART II **COlumn 1)** **COlumn 2)** **COlumn 2)** **COlumn 3)** **CLAIMS REMAINING REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR PAID FOR PREVIOUSLY PAID FOR	/000
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(Column 1) (Column 2) (Column 3)	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM + \$ 180 = OR + \$ 360 =	
TOTAL ADDIT. FEE FEE FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" (N THIS SPACE is less than '20', enter "20".	

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.